

CHARITY  NEXUS

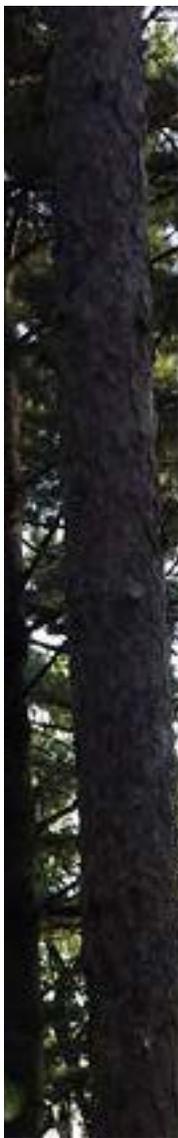


# Charity Nexus 2016 Help Guide Federation

CHARITY  NEXUS

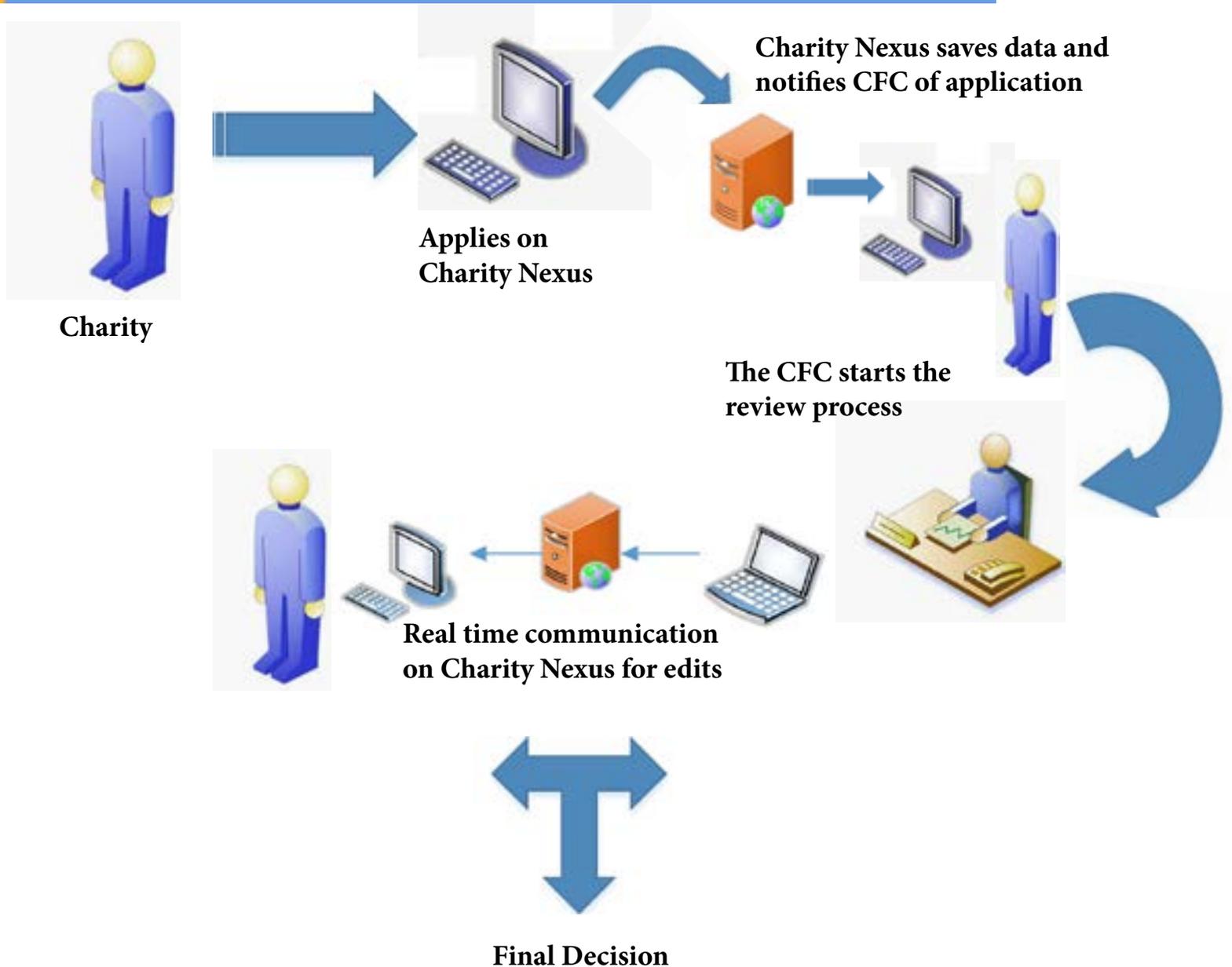
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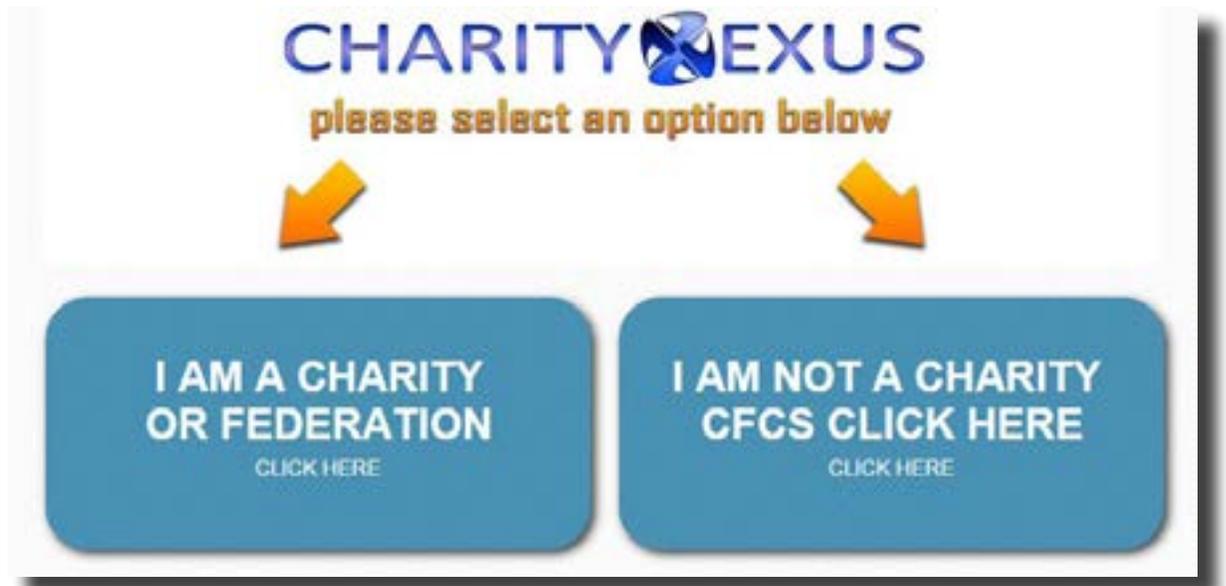
# Getting Started: Why Use Charity Nexus?

Charity Nexus takes the paper application process to a whole new level. Charities can apply to multiple CFC regions and get real time feedback about the status of their application(s). Charity Nexus saves applications and communication from previous years, allowing for charities to archive their applications and supported attachments.



# Getting Started

The website to go to for charity applications is [www.charitynexus.org/\\_apply](http://www.charitynexus.org/_apply). If you search for and end up on [www.charitynexus.org](http://www.charitynexus.org) you will see the button to click for charities or federations.

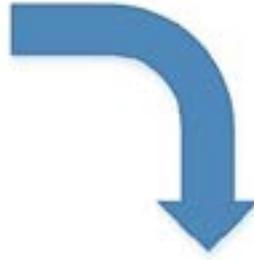


You will see two options on the website. If you are new to Charity Nexus, you will have to register. If you are an existing user, you can click I HAVE REGISTERED LOG IN NOW.



# Registration

**I AM NEW  
REGISTER ME**  
CLICK HERE



Click the button called I AM NEW REGISTER ME.

Enter in the Following:

- Name
- Email
- Username
- Charity EIN
- Password

Passwords must be six or more characters and are case sensitive.

**REGISTER**

<b>FIRST NAME:</b> first name	<b>LAST NAME:</b> last name
<b>EMAIL:</b> email address	<b>CONFIRM EMAIL:</b> confirm email
<b>USERNAME/LOGIN:</b> username/login <small>(Usernames/Logins ARE case sensitive)</small>	<b>CHARITY EIN (must be 9 digits):</b> 00 - 0000000 <small>(This is 9 digit federal tax ID of the charity you represent)</small>
<b>PASSWORD:</b> password <small>(Passwords must be 6 characters or more, Passwords ARE case sensitive.)</small>	<b>CONFIRM PASSWORD:</b> confirm password

**ALL FIELDS REQUIRED**

[I forgot my login or password](#) [I have a login & password](#)

**XCLOSE**

**Helpful Hint: Duplicate EIN.** If your organization's EIN is in the system, you can request to be added to that account. You can also indicate that you are from a new chapter if your charity has multiple chapters. Check the box and click Register Me.



This EIN has already been registered. If you are part of one of these organization, choose that one and hit submit. You will need to be approved a member of that organization.

SELECT	ORGANIZATION	EXISTING ADMINISTRATOR	EMAIL ADDRESS
<input checked="" type="radio"/>	My Demo's Charity	Levi McCy	levi@charitynexus.org
<input type="radio"/>	My Demo's Charity	Demo Charity	info@charitynexus.org

I am a new chapter sharing that EIN. Please create a new account for me.

# Login

**I HAVE REGISTERED  
LOG IN NOW**

CLICK HERE

Enter in your username and password. Then click GO. If you need to reset your password, click *I forgot my login or password*.



**LOGIN**

**WELCOME** username:  \*

password:  \* **GO**

Please enter your username and password above. If you have not yet registered, click on **I AM A FIRST TIME APPLICANT** below. If you have logged in but forgot your password, click on **I FORGOT MY LOGIN OR PASSWORD** below.

[I am a first time applicant](#) [I forgot my login or password](#)

**XCLOSE**

**Helpful Hint: Password Recovery.** Enter the email associated with your account. The system will send an email with instructions on how to reset the password. You may need to look in your junk/SPAM folder for the email from Charity Nexus.



# My Profile

**My Profile is your personal profile and not the charity profile. This is for your access into your Charity Nexus account.**

The screenshot shows a web interface for updating a user's profile. At the top, there is a navigation bar with 'MAIN MENU' and 'MY PROFILE' (with a dropdown arrow). Below this, a breadcrumb trail shows 'my profile'. The main heading is 'MY PROFILE'. The form is titled 'CHANGE YOUR PROFILE INFORMATION BELOW' and contains several input fields: 'FIRST NAME', 'LAST NAME', 'EMAIL ADDRESS', and 'CONFIRM EMAIL ADDRESS'. There is also a 'YOUR LOGIN/USERNAME' field. A 'CHANGE CURRENT PASSWORD' section includes two radio button options: 'No, keep my current password' (selected) and 'Yes, I want to change my password'. An orange 'UPDATE MY PROFILE' button is located at the bottom right of the form.

## **Helpful Hint: My Profile.**

**If you need assistance with resetting your password, you can contact the CFC office and request a temporary password. Once logged in, you can go to MY PROFILE and update your password. The name and email address can also be edited.**

# Your Homepage Defined

VIEW OR EDIT MY CHARITY PROFILE



**VIEW OR EDIT  
MY CHARITY PROFILE**

CLICK HERE

Please verify your profile data, including contact information, 25 word statement, and optional bank account data. Then click UPDATE PROFILE.

A screenshot of the "CHARITY PROFILE" form. At the top, there is a blue header "CHARITY PROFILE". Below it is a blue box with an information icon and the text "Charity Profile Tip: These fields are used to automatically fill in the fields on applications, greatly reducing your time to completion. All fields are required unless marked as optional. A complete profile is required to continue. Estimated time to complete: 15 minutes." The form is divided into sections: "ORGANIZATION INFORMATION" with fields for "ORGANIZATION NAME", "ORGANIZATION TYPE", "EIN", "5 DIGIT CFC NUMBER (4999)", "TELEPHONE NUMBER", "STREET ADDRESS", "CITY", "STATE", and "ZIP"; "PERSONAL INFORMATION" with fields for "PERSONAL NAME" and "PERSONAL ADDRESS"; and "25 WORD STATEMENT" with a text area. A checkbox is present for "Check this box if the above address is different than the address submitted with the 2015 CFC application." The form is partially obscured by a large orange button.

**UPDATE PROFILE**

## Helpful Hint: My Profile.

The data from the profile will be used to auto-populate some sections of the application. This will help save time while filling out the application. Filling out the application MUST be completed in one sitting.

The Bank account information is optional. There are two payment methods for processing your application: e-Check or Credit Card.

# Manage Website Users

CHARITY NEXUS

SUBMIT APPLICATION  
TO A CFC  
CLICK HERE

VIEW OR EDIT  
MY APPLICATIONS  
CLICK HERE

VIEW OR EDIT  
MY CHARITY PROFILE  
CLICK HERE

MANAGE  
WEBSITE USERS  
CLICK HERE

## MANAGE CHARITY USERS

### Manage Users Tips

These are all the users associated with your organization. As a security measure, new users need to be enabled by existing users.

### USER MANAGEMENT TOOL

Name	Email Address	Enabled	Action
Joel Weisel			
Levi Zefflow	levi@joel.com		Click to Disable
sfvs afbva		YES	Click to Enable

As the main account holder, you have the ability to manage any other users from your organization that would also like to participate in the application process.

You can click to enable their request to access the charity profile and application. This is helpful when a change happens in the middle of the process and someone else needs to manage the account.

## MANAGE CHARITY USERS

### Manage Users Tips

These are all the users associated with your organization. As a security measure, new users need to be enabled by existing users.

### USER MANAGEMENT TOOL

Name	Email Address	Disabled	Action
Joel Weisel			
Levi Zefflow	levi@joel.com		Click to Disable
sfvs afbva		YES	Click to Enable

# View or Edit My Applications



Click **VIEW OR EDIT MY APPLICATION** to see the status of your application(s) and make any necessary edits.



You can view previous year's applications, and see the current status of your application here. Click the green circle to expand the data.

## MY APPLICATIONS

DISPLAYED REPORT YEAR: 2016

### My Applications Tips

Below are all the applications from your organization, sorted by current status. Applications that are Incomplete or Completed are not visible to the CFC. Applications must be Submitted for the CFC to view them. Once an application has been Submitted, it can not be modified until it is Returned.

MORE STATUS



# Submit Application to a CFC

TION COMBINED FED

When you are ready to start your application, click **SUBMIT APPLICATION TO A CFC**

CHARITY NEXUS

**SUBMIT APPLICATION TO A CFC**  
CLICK HERE

**VIEW OR EDIT MY APPLICATION**  
CLICK HERE

**VIEW OR EDIT MY CHARITY PROFILE**  
CLICK HERE

**MANAGE WEBSITE USER**  
CLICK HERE

**SUBMIT APPLICATION TO A CFC**  
CLICK HERE

Select **APPLY AS A FEDERATION** to start the application process. Please note you must complete the application in one sitting.

PLEASE SELECT ONE OF THE APPLICATION OPTIONS BELOW

**APPLY AS AN INDEPENDENT CHARITY**

(a single charity)

CLICK HERE

**APPLY AS A FEDERATION**

(for multiple charities)

CLICK HERE

**RETURN TO HOMEPAGE**

# Before Starting The Application

## How many parts are there?

The application has two parts: the form and the attachments page.

## How do I save my application?

At the end of the form you will click the orange **SUBMIT APPLICATION & PROCEED TO FILE UPLOAD**. This will save the form data.



**SUBMIT APPLICATION & CONTINUE TO FILE UPLOAD**

## What attachments will I need?

The top of the application form lists the attachments you may need. Charity Nexus will accept most types of file formats (ex: Word, PDF, JPEG and TIF). **Please use the provided template for your member list.**

## Where and how do I pay the fee?

The payment page is the last step in the process. You can pay by credit card or e-Check.



# The File Upload Page

## FILE UPLOAD

### 1 File Upload File

Each upload below is required for your application. File names with special characters should be removed before uploading. Recommended format is: A\_File\_Name\_2012.pdf. If you are having issues with the upload, rename your file and try again. After all uploads have completed, you will be taken to a final check before submission.

Estimated time to complete: Varies based on connection speed.

If you have trouble uploading your documents, please send them to [rcm@imn.com](mailto:rcm@imn.com). Please include your application number in the subject of the email.

Upload each required file one at a time. The member list will show an error rows. Please note the header row will display as an error row.

ATTACHMENT UPLOAD FOR APPLICATION # 9219 - OVERVIEW

A - MEMBER ORGANIZATIONS

ATTACHMENT A

Include as ATTACHMENT A a list of the federation and all member organizations that meet this requirement. Click here to download the required template.

[Choose File](#) No file chosen [Upload](#)

B - IRS TAX EXEMPT STATUS

ATTACHMENT B

Include as ATTACHMENT B a copy of the federation's most recent IRS determination letter and the IRS determination letter and/or other supporting documentation that reflects the tax-exempt status of its member organizations.

[Choose File](#) No file chosen [Upload](#)

C - AUDITED FINANCIAL STATEMENT

ATTACHMENT C

Include as ATTACHMENT C a copy of the auditor's report and the complete audited financial statements for a fiscal period ending not more than 18 months prior to January 20 18. Each entry that the federation is honoring designations have to each member organization by distributing a proportionate share of assets based on their designations to each member.

[Choose File](#) No file chosen [Upload](#)

D - IRS 990-SS

ATTACHMENT D

Include as ATTACHMENT D a copy of the complete IRS Form 990 for a period ending not more than 18 months prior to January 20 18, including signatures of the tax preparer (signature of officer or in IRS Form 990-BE to 9433-BE).

[Choose File](#) No file chosen [Upload](#)

E - GOVERNING BODY

ATTACHMENT E

Include as ATTACHMENT E a list of the federation's board of directors with the beginning and ending date of each board member's current term of office.

[Choose File](#) No file chosen [Upload](#)

F - PUBLIC ANNUAL REPORT

ATTACHMENT F

Include as ATTACHMENT F a copy of the most recent completed annual report.

[Choose File](#) No file chosen [Upload](#)

After all attachments are uploaded, you can click the grey SHOW/CHANGE ATTACHMENTS to view any errors or click the orange **CLICK HERE TO COMPLETE YOUR APPLICATION** to proceed to the next step.

All Attachments for application #9316 have been uploaded.

Some member applications did not import. Please correct these in the spreadsheet and upload them again.

[CLICK HERE TO COMPLETE YOUR APPLICATION](#)

[SHOW/CHANGE ATTACHMENTS](#)

### A - MEMBER ORGANIZATIONS

#### ATTACHMENT A

Include as ATTACHMENT A a list of the federation and all member organizations that meet this requirement. Click here to download the required template.

[VIEW ATTACHMENT A](#)

[RE-UPLOAD THIS FILE](#)

Total Rows Processed: 5, Successful: 4, Failed: 1

# New Members and Audited Members

New members are required to have a full application with supporting attachments. The CFC may have an audit percentage in place that will randomly select members for full applications and supported documents. The [CLICK HERE](#) link will open a new application form. Once you complete the necessary steps, you will be returned to the image below to continue filling out applications.

These member applications are either new or selected for full application and/or file uploads.

APP ID	ORG NAME	STATUS
9255	Dress for Success	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9256	Durham Economic Resource Center	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9256	El Futuro, Inc.	A full application is required. <a href="#">CLICK HERE</a> to complete the form. All attachments have been uploaded.
9261	Harbor, Inc.	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9267	Resources for Seniors, Inc.	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9268	SAFEChild	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9270	The Center for Volunteer Caregiving	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9271	The Daniels Center for Math and Science	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9272	The Volunteer Center of Durham	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9274	Tuscarora Council, Boy Scouts of America	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.
9275	Urban Ministries of Wake County, Inc.	A full application is required. <a href="#">CLICK HERE</a> to complete the form. There are missing attachments. <a href="#">CLICK HERE</a> to upload them.

Once all of the member applications requiring more data have been completed, you will see the system checks and the button to submit the application.

CHECKING APPLICATION #9316

All attachments have been uploaded.

All member charity applications are complete.

All checks have passed. Continue to submit.

**SUBMIT APPLICATION  
TO  
DEMONSTRATION CFC FOR TESTING**

# The Payment Page

PAYMENT FOR APPLICATION #9287  
APPLYING TO DEMONSTRATION CFC FOR TESTING  
TOTAL COST IS \$ 10

## PAY BY ACH

<b>ACCOUNT TYPE</b> <input type="radio"/> Check <input type="radio"/> Savings	<b>ROUTING NUMBER</b> 000000000	<b>ACCOUNT NUMBER</b> 523624563457	<b>BANK NAME</b> Bank Name
<b>ACCOUNT HOLDER FIRST NAME</b> John	<b>ACCOUNT HOLDER LAST NAME</b> Doe		

## PAY BY CREDIT CARD

SUBMIT PAYMENT

The e-Check option opens first. To pay by credit card, click the PAY BY CREDIT CARD button. The data field will expand to display the form. Then click SUBMIT PAYMENT.

## PAY BY ACH

## PAY BY CREDIT CARD

<b>CREDIT CARD TYPE</b> <input type="radio"/> American Express <input type="radio"/> Discover Card <input checked="" type="radio"/> Mastercard <input type="radio"/> VISA Visa	<b>FIRST NAME AS APPEARS ON CARD</b> Test First Name	<b>LAST NAME AS APPEARS ON CARD</b> Test Last Name
<b>CREDIT CARD NUMBER</b> 1234567890123456 <small>16 digits</small>	<b>EXPIRATION DATE</b> 01 / 2016	<b>SECURITY CODE</b> 123 <small>3 digits on back of card</small>

## CARDHOLDER ADDRESS & PHONE NUMBER

<b>BILLING ADDRESS</b> 123 Fake Street	<b>CITY</b> Fake City	<b>STATE</b> HI	<b>ZIP</b> 55555	<b>CARDHOLDER PHONE</b> 123-456-7890
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SUBMIT PAYMENT

Once you submit the payment, your application is submitted to the CFC. You can see the status of it in View or Edit My Applications.

## APPLICATION SUBMISSION COMPLETE

APPLICATION #9287 SUCCESSFULLY SUBMITTED

The application must now be reviewed by DEMONSTRATION CFC FOR TESTING.

To check the status of Application #9287 visit MY APPLICATIONS.

# The Review Process

## MY APPLICATIONS

DISPLAYED REPORT YEAR: 2016

### My Applications Tips

Below are all the applications from your organization, sorted by current status. Applications that are Incomplete or Completed are not visible to the CFC. Applications must be Submitted for the CFC to view them. Once an application has been Submitted, it can not be modified until it is Returned.

#### MORE STATUS



**COMPLETED** (1) - Applications that are filled out and have attachments, but have not been submitted for CFC review. These applications need to go through the payment and submission process.



**SUBMITTED** (2) - Applications that have been submitted to the CFC. The application has not yet been accepted by the CFC. Please wait for the next status change.



**RETURNED INCOMPLETE** (1) - Applications that have been returned to the charity for corrections. This application needs to be corrected/edited for problems prior to resubmitting.

## What does each status mean?

**Completed:** Application has been filled out and the attachments have been uploaded. The application needs to go through the payment process and final submission to the CFC

**Submitted:** Applications have been paid for and sent to the CFC. No edits can be made to the application at this level.

### Returned

**Incomplete:** Application has been returned by the CFC for corrections. You can see the requested edits in the Application Notes. Make any necessary changes and click Resubmit. Please see next section for the editing process.

**Withdrawn:** After submitting an application, the charity can withdraw the application, which removes it from the queue on the CFC side.

### Awaiting

### Reviewer

**Assignment:** The application has been accepted and is waiting to be reviewed.

### Pending

**Approval:** The application is in the review process.

**Approved:** The application has been approved

**Denied:** The application has been denied

## Important Note: Approved/Denied

The CFC will send out letters for applications that have been approved and for applications that have been denied.

# Editing The Application and Attachments

You may receive an email noticed that your application has been returned incomplete. Login to your account and go to **VIEW OR EDIT MY APPLICATIONS**

**VIEW OR EDIT MY APPLICATIONS**

CLICK HERE

Expand the Returned Incomplete by clicking the green circle. Then click the second green circle to open your application.

MORE	STATUS		
	<b>RETURNED INCOMPLETE (1)</b> - Applications that have been returned to the charity for corrections resubmitting.		
Expand	APP ID	EIN	CFC
	9316	011234567	Demonstration CFC for Testing

Under Application Notes, you will see the issue. You can respond with a comment and click **Submit** to save that comment. If you need to edit the application section, click the blue **Edit** button.

**Edit**

Back to list

Resubmit

Withdraw

**9316 | GIVETOJOEL(FED)**

FEDERATION

APPLICATION NOTES

990 Form needs signature

Application specific notes.

# Editing the Application Continued

**10 - TRUTHFUL PROMOTIONAL ACTIVITIES**

**TRUTHFUL AND NON-DECEPTIVE PROMOTIONAL ACTIVITIES**

I certify that the organization named in this application conducts publicity and promotional activities based upon its actual program and operations, and that these activities are truthful and non-deceptive. Include all material facts, and make no exaggerated or misleading claims.

**11 - PURPOSE OF FUNDS**

**PURPOSE OF FUNDS**

I certify that the organization named in this application effectively uses the funds contributed for its announced purposes.

**12 - STATUTES COMPLIANCE**

**STATUTES COMPLIANCE**

I certify that the organization named in this application is in compliance with all statutes, executive orders, and regulations pertaining to prohibiting U.S. persons from engaging in transactions and dealings with countries, entities, or individuals subject to economic sanctions administered by the U.S. Department of the Treasury's Office of Foreign Assets Control. The organization named in this application is aware that a list of countries subject to such sanctions, a list of Specialty Designated Nationals and Blocked Persons subject to such sanctions, and conditions and guidelines for each such sanctions program can be found at [www.treasury.gov/ofac](#). Should any change in circumstances pertaining to this certification occur at any time, the organization will notify OPW's CFC Operations immediately.

**CERTIFYING OFFICIAL**

I, , am the duly appointed representative of , authorized to certify and affirm all statements enclosed in this application. I certify that I have read all the certifications set forth in this document and affirm their accuracy. In addition, by checking the box next to the certification, the organization named in this application acknowledges and agrees to comply with that certification.

**APPLICATION FORM ELECTRONIC SIGNAL LINE**

Please use your mouse to sign this pledge. Click and hold the mouse down to trace. (press to sign within the gray box)

NAME	TITLE	DATE
<input type="text" value="Your Name"/>	<input type="text" value="President/Chairman etc."/>	<input type="text" value="12/20/2016"/>

**ADDITIONAL NOTES OR COMMENTS**

These notes are not part of the application form, but are supplementary to the CFC for clarification. They will be able to see and respond to these.  
Name, Company, or Certifying Information

**PUBLIC BURDEN STATEMENT**

We think this form takes an average of 3 hours to complete, including the time for getting the needed data and reviewing both the instructions and completing the form. Send messages regarding our estimate or any other aspects of this form, including suggestions for reducing completion time to Office of Personnel Management (OPM), CFC Operations (220-0231), Washington, DC 20415-0861. Use OMB number 5010-0121 as summary text. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

**Submit Application**

You will see the application and can make any edits needed. You will be required to type your name, role and sign the application in order to verify that you made the edits to the application. Click the **Submit Application & Continue to File Upload** button.



**SUBMIT APPLICATION & CONTINUE TO FILE UPLOAD**

The system checks your attachments and then asks you to click the orange button to finalize the changes made.



**ATTACHMENT UPLOAD FOR APPLICATION # 9220 - GivetoJoel**

All Attachments for application #9220 have been uploaded.

**CLICK HERE TO COMPLETE YOUR APPLICATION**

**SHOW/CHANGE ATTACHMENTS**

Finally, click the **Submit Application** to send the application back to the CFC.



**CHECKING APPLICATION #9220**

All attachments have been uploaded.

All checks have passed. Continue to submit.

**SUBMIT APPLICATION TO DEMONSTRATION CFC FOR TESTING**

# Editing Your Attachments

When you only need to edit your attachments, you can take a different path versus editing the application.

Begin by logging in and going to **VIEW OR EDIT MY APPLICATIONS...**



**VIEW OR EDIT MY APPLICATIONS**  
CLICK HERE

MORE	STATUS		
	<b>RETURNED INCOMPLETE (1) - Applications that have been returned to the charity for corrections. resubmitting.</b>		
<b>Expand</b>	<b>APP ID</b>	<b>EIN</b>	<b>CFC</b>
	9316	011234567	Demonstration CFC for Testing

Expand Returned Incomplete, then expand your application. Scroll down to the bottom to the Attachments section of the application and click on the link called *Click here to modify Attachments.*



**ATTACHMENTS**

[Click here to modify attachments.](#)

**ATTACHMENT A**

[CLICK HERE TO VIEW/DOWNLOAD](#)

**ATTACHMENT C**

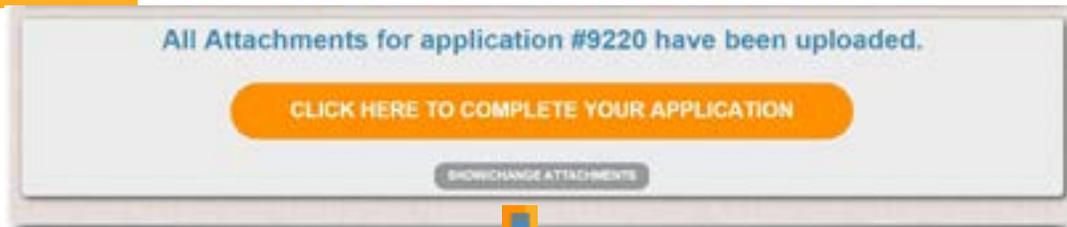
Not required

Attachment editing continued on next page...



# Editing Attachments Continued

To edit the attachments, click on the grey **SHOW/CHANGE ATTACHMENTS** button to expand the upload tool.



**SHOW/CHANGE ATTACHMENTS**

Click on **RE-UPLOAD THIS FILE** to select the updated file from your computer.

**RE-UPLOAD THIS FILE**

A screenshot of a web application interface showing three attachment sections. Each section has a title, a description, and two buttons: "VIEW ATTACHMENT X" and "RE-UPLOAD THIS FILE".

- ATTACHMENT A**: Includes supporting statements and/or documentation or substantial local presence in the geographical area covered by the local campaign and a description of the programs, services, benefits, etc. provided by the organization in calendar year 2015 and how those programs, services, benefits, etc. affect human health and welfare of the target population.
- B - IRS TAX EXEMPT STATUS**: Includes as ATTACHMENT B a copy of the most recent IRS determination letter confirming that the organization named in this application is tax-exempt under 26 U.S.C. 501(c)(3) and to which contributions are tax deductible pursuant to 26 U.S.C. 170(c)(2).
- D - ACCOUNTING**: Includes as ATTACHMENT D a copy of the complete IRS Form 990 for a period ending not more than 18 months prior to January 2016, including signatures in the box marked Signature of Officer or in IRS Forms 8879-EO or 8453-EO. the preparer's signature alone is not sufficient. IRS Forms 990EZ, 990PF, and comparable forms are not acceptable substitutes.

After you have re-uploaded your edited attachments, scroll up and click the **CLICK HERE TO COMPLETE YOUR APPLICATION** button.

**CLICK HERE TO COMPLETE YOUR APPLICATION**

# Editing Member Applications and Attachments

MORE	STATUS		
	<b>RETURNED INCOMPLETE (1)</b> - Applications that have been returned to the charity for corrections. resubmitting.		
Expand	APP ID	EIN	CFC
	9316	011234567	Demonstration CFC for Testing

Expand the Returned Incomplete, then open your application. Scroll down to the member charities and expand the charity needing edits. You can click the blue **EDIT** button to edit the application or *Click here to modify attachments.*

EXPAND	ORGANIZATION
	Alliance Medical Ministry
	Big Brothers Big Sisters of the Triangle
	Boy Girls Clubs of Wayne County, Inc.
	United Way of the Greater Triangle, Inc.

MEMBER CHARITIES 5

EXPAND	ORGANIZATION	NEW/EDIT MEMBER	APPROVE   DENY
	Alliance Medical Ministry	New Member Charity	

[Attachments](#) [Edit](#)

**9316 | ALLIANCE MEDICAL MINISTRY**

**ORGANIZATION INFORMATION**

NAME: Alliance Medical Ministry      DBA NAME:

ADDRESS: 101 Donald Ross Dr. Raleigh NC 27603

EN: 55-218872      PHONE: 919-285-9254      FAX:

WEBSITE: www.alliancemedicalministry.org      CFC NUMBER:

**CHARITY CLASSIFICATION**

NTSE CODE #1: E - Health Care      NTSE CODE #2: F - Mental Health & Crisis Intervention      NTSE CODE #3: K - Food, Agriculture, & Nutrition

**CFC IS WORD STATEMENT**  
Provides medical care for Wake County's adult working uninsured including primary and select specialty medical care, lab, screenings, medications, wellness programs, counseling and mental health.

**CONTACT INFORMATION**

TITLE / NAME: Director, Main Job      ADDRESS: 101 Donald Ross Dr. Raleigh, NC 27603

EMAIL: development@alliancemedicalministry.org      PHONE / EXT: 333-500-9987

**DISBURSEMENTS**

ADDRESS: 101 Donald Ross Dr. Raleigh NC 27603      RTUING: 44378900      ACCOUNT: 3333482914767676      BANK: Glorix Bank

**01 - GEOGRAPHICAL INFORMATION**

AREA: local      SERVICE ADDRESS: 101 Donald Ross Dr. Raleigh NC 27603

**HOURS OF OPERATION**  
M-F 7 AM to 5 PM

**SERVICE COUNTIES**

02 - IRS TAX EXEMPTION STATUS: YES      03 - GROUP EXEMPTION: NO      04 - HUMAN HEALTH & WELFARE: YES      05 - ACCOUNTING: LAST YEAR \$100,000

06 - FORM 990: Not required to submit      07 - ADMIN FUNDRAISING RATE: 1.00%      08 - GOVERNING BODY: YES      09 - PROMPT SALE OR LEASE: YES

10 - TRUTHFUL PROMOTIONAL ACTIVITIES: YES      11 - PURPOSE OF FUNDS: YES

12 - STATUTES COMPLIANCE: YES

**APPLICATION INFORMATION**

APPLICATION CREATED BY: JOE YEWER      CREATED ON: Mar 04, 07 2018

**ATTACHMENTS**

Click here to modify attachments.

**ATTACHMENT A**  
CLICK HERE TO VIEW/DOWNLOAD

**ATTACHMENT C**  
Not required      CLICK HERE TO VIEW/DOWNLOAD

**ATTACHMENT D**  
CLICK HERE TO VIEW/DOWNLOAD

[Attachments](#) [Edit](#)

**ATTACHMENTS**

Click here to modify attachments.

# Editing Member Charities Continued

ATTACHMENT UPLOAD FOR APPLICATION # 9318 - Alliance Medical Ministry

All Attachments for application #9318 have been uploaded.

[CLICK HERE TO COMPLETE YOUR APPLICATION](#)

[SHOW/CHANGE ATTACHMENTS](#)

[SHOW/CHANGE ATTACHMENTS](#)

Click on **SHOW/CHANGE ATTACHMENTS** to open the attachment uploaders. Then click **RE-UPLOAD THIS FILE**

[RE-UPLOAD THIS FILE](#)

ATTACHMENT UPLOAD FOR APPLICATION # 9318 - Alliance Medical Ministry

All Attachments for application #9318 have been uploaded.

[CLICK HERE TO COMPLETE YOUR APPLICATION](#)

[SHOW/CHANGE ATTACHMENTS](#)

## A - GEOGRAPHIC REGION

### ATTACHMENT A

Include as ATTACHMENT A supporting statements and/or documentation of substantial local presence in the geographical area covered by the local campaign and a description of the programs, services, benefits, etc. provided by the organization in calendar year 2015 and how those programs, services, benefits, etc. affect human health and welfare of the target population.

[VIEW ATTACHMENT A](#)

[RE-UPLOAD THIS FILE](#)

## B - IRS TAX EXEMPT STATUS

### ATTACHMENT B

Include as ATTACHMENT B a copy of the most recent IRS determination letter confirming that the organization named in this application is tax-exempt under 26 U.S.C. 501(c)(3) and to which contributions are tax deductible pursuant to 26 U.S.C. 170(c)(2).

[VIEW ATTACHMENT B](#)

[RE-UPLOAD THIS FILE](#)

## D - ACCOUNTING

### ATTACHMENT D

Include as ATTACHMENT D a copy of the complete IRS Form 990 for a period ending not more than 18 months prior to January 2016, including signatures in the box marked Signature of Officer or in IRS Forms 8879-EO or 8453-EO. the preparer's signature alone is not sufficient. IRS Forms 990EZ, 990PF, and comparable forms are not acceptable substitutes.

[VIEW ATTACHMENT D](#)

[RE-UPLOAD THIS FILE](#)

# Editing Member Charities: Multiple Edits

**IMPORTANT:** If you need to edit more than one member application/attachments, **DO NOT** click **SUBMIT APPLICATION** until you have finished all edits. After editing one member, click **MAIN MENU**, my applications to select your application again in **RETURNED INCOMPLETE**. Repeat the editing steps again. When you have finished the last one, click **SUBMIT APPLICATION**.

MAIN MENU MY PROFILE

home  
charity profile  
apply to a cfc  
fsya application  
my applications  
my receipts  
manage users  
cfc charity lookup  
contact us

## APPLICATION COMPLETENESS CHECK

**i** Application Check Tips  
This page checks to make sure the application is complete. Any missing information will be noted below. Clicking on submit below will take you to payment processing.

CHECKING APPLICATION #8316

All attachments have been uploaded.

All member charity applications are complete.

All checks have passed. Continue to submit.

**SUBMIT APPLICATION  
TO  
DEMONSTRATION CFC FOR TESTING**

**SUBMIT APPLICATION  
TO  
DEMONSTRATION CFC FOR TESTING**

# The final Steps

After you have edited and re-submitted, you will have to wait during the review process. Please look out for email notifications regarding updates to your application. If you need a receipt for your records, you can go to MAIN MENU, *my receipts*

Click the green circle to expand the receipt data. Then you can click the **PRINT** button to make a copy.

## MY RECEIPTS

Here you can print a receipt for the application fee. Expand the application you need and click PRINT.



9280 Demonstration CFC for Testing  
2015-12-01 07:07



Date: 2015-12-01 07:07

**Your payment for Demonstration CFC for Testing, application #9280 has been processed.**

**PRINT**

A charge of **\$10** has been made to your credit card. The payment will appear from CharityNexus.org.

Your application has been submitted. It will be processed by Demonstration CFC for Testing accordingly. Please contact them regarding application status.

Thank you for using Charity Nexus.



CHARITY  NEXUS